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FROMMER LAWRENCE & HAUG LLP

745 Fifth Avenue
New York, New York 10151
Telephone: (212) 588-0800
Facsimile: (212) 588-0500

FACSIMILE COVER LETTER

To: Central Fax Center
Firm: U.S. Patent and Trademark Office
Facsimile No.: 571-273-8300
From: William S. Frommer
Date: May 7, 2007
Re: U.S. Application Serial No. 10/508,802
Attorney Docket: 450100-04421
No. of Pages: 7
(including cover page)

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00449074.DOC

MAY 07 2007 PATENT
450100-04421IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Tomohisa SHIGA
 Serial No. : 10/508,802
 For : OPERATION-PROCESSING DEVICE, METHOD FOR CONSTRUCTING THE SAME, AND
 OPERATION-PROCESSING SYSTEM AND METHOD
 Filed : September 23, 2004
 Examiner : Jesse R. Moll
 Art Unit : 2181

745 Fifth Avenue
 New York, NY 10151
 Tel: 212-588-0800

Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required.
☐ The fee has been calculated as shown below.
☐ This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional Fee
Total claims	8	Minus	** = 25	*0x	\$50 (25)	=\$0
Independent claims	2	Minus	*** = 6	*0x	\$200 (100)	=\$0
Total additional fee for this amendment						\$0

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
 ** If the highest number of total claims previously paid for is less than 20, write "20" in this space.
 *** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

- ☐ This application contains a multiple dependent claim. The required fee of \$360(180) has been previously paid ☐, or is paid herewith ☐.
- ☐ This response is being filed within the ___ month following the expiration of the term originally set therefore. This is a petition to request a ___ month extension of time. A check covering the cost of the petition is enclosed.
- ☐ A check in the amount of \$ ___ is attached, which covers the cost of ☐ additional claims ☐ petition for extension of time.
- ☐ Charge \$ ___ to Deposit Account No. 50-0320.
- ☒ Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

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 Trademark Office on the date shown below

Barnet Shindler
 Type or print name of
 Person signing certification
Barnet Shindler
 Signature
 May 7, 2007
 Date of Signature

Respectfully submitted,

FROMMER LAWRENCE & HAUG LLP
 Attorneys for Applicants

By: William S. Frommer
 William S. Frommer
 Reg. No. 25,506
 Tel: 212-588-0800

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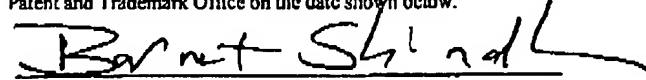
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450100-04421**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**RECEIVED
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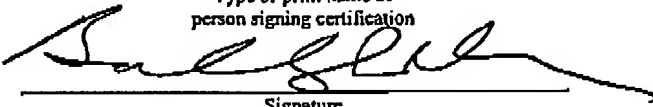
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Filed : September 23, 2004
Examiner : Jesse R. Moll
Art Unit : 2181

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New York, NY 10151**FACSIMILE**

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Signature

May 7, 2007

Date of Signature

AMENDMENT IN RESPONSE TO RESTRICTION REQUIREMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Restriction Requirement dated April 6, 2007, please amend the above-
identified application as follows: